

DO/EO BIBLIOGRAPHIC DATA ENTRY

|                              |  |                           |                      |
|------------------------------|--|---------------------------|----------------------|
| SERIAL NUMBER:               | 09 / 831888                              | RECEIPT DATE:             | 05 / 23 / 01         |
| IA NUMBER:                   | PCT/ EP99 / 09002                        | IA FILING DATE:           | 11 / 23 / 99         |
| FAMILY NAME:                 | LEWIS                                    | DELAY WAIVED (Y/N):       | Y                    |
| GIVEN NAME:                  | DAVID                                    | DEMAND RECEIVED (Y/N):    | Y                    |
| PRIORITY CLAIMED (Y/N):      | Y  | PRIORITY DATE:            | 11 / 25 / 98         |
| NO BASIC FEE (Y/N):          | N  | US DESIGNATED ONLY (Y/N): | N                    |
| ATTORNEY DOCKET NUMBER:      | 208858USOPCT                             | COUNTRY:                  |                      |
| CORRESPONDENCE NAME/ADDRESS: | CUSTOMER NUMBER:                         | 022850                    | TELEPHONE 7034133000 |
|                              |  |                           | FAX 7034132220       |
| NAME:                        | OBLON SPIVAK MCCLELLAND MAIER & NEUSTADT |                           |                      |
|                              | FOURTH FLOOR                             |                           |                      |
| STREET:                      | 1755 JEFFERSON DAVIS HIGHWAY             |                           |                      |
| CITY:                        | ARLINGTON                                |                           |                      |
| STATE/COUNTRY:               | VA                                       | ZIP:                      | 22202                |
| EMAIL:                       |  |                           |                      |
| APPLICATION TITLES:          |  |                           |                      |
|                              | PRESSURE METERED DOSE INHALERS MDI       |                           |                      |

TAB TO LAST POSITION,PUSH SEND